



**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	0092050 DIV3
First Inventor	Junzhong Liang
Title	Apparatus and Method for Measuring Vision Defects of a Human Eye
Express Mail Label No.	EV322684999US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

Applicant claim small entity status. See 37 CFR 1.27
 Specification [17] Total Pages
 Drawing(s) (35 USC 113) [4] Total Sheets
 Suggested drawing figure to be published: Fig. [1]
 Oath and Declaration [3] Total Pages
 Newly executed (original or copy)
 Copy from prior application (37 CFR 1.63 (d))
 Information Disclosure Statement (IDS)/PTO SB 8A
 Copies of cited references

ADDRESS TO:
 Commissioner for Patents
 Mail Stop Patent Application
 P.O. Box 1450
 Alexandria, VA 22313-1450

Assignment Papers (cover sheet & document(s))
Assignee Information
 Name Alcon, Inc.
 Address Hunenberg, Switzerland
 Nonpublication Request Under 35 USC 122(b)(2)(B)(i)
 Preliminary Amendment
 Return Receipt Postcard (MPEP 503)
 Copy of Decision According Status Under 37 CFR 1.47(a) from parent

If a CONTINUING APPLICATION check appropriate box

Continuation Divisional Continuation-in-part (CIP) Prior Application No. 09/919,374

Prior application information Examiner John R. Sanders Art Unit 3737

For **CONTINUATION OF DIVISIONAL APPS** only; The entire disclosure of the prior application is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

CLAIMS AS FILED

	No. Filed	No. Extra	Rate	Fee
Total Claims	22	2	\$ 18.00	\$ 36.00
Independent Claims	3	0	\$ 84.00	\$ 0.00
Assignment Recording Fee				
Basic Filing Fee				\$ 750.00
TOTAL FILING FEE				\$ 786.00

Enclosed is a check in the amount of the Total Filing Fees.

The Commissioner is authorized to charge or credit any discrepancies in the fee amount to Deposit Account: 01-0484.

CORRESPONDENCE ADDRESS

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